PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correcte maintenance fee notificat	d below or directed oth	ig the Patent, advance of the in Block 1, by ((a) specifying a new corresp	pondence address;	and/or (b) indicating a separ	ate "FEE ADDRESS" for
CURRENT CORRESPONDE		ock 1 for any change of address)	CONTROL Feels	c) Transmittal Thi	s certific	ate cannot be used fo	domestic mailings of the rany other accompanying t or formal drawing, must
4800 IDS Center	istensen, Esq. te, Skaar & Christe , 80 South Eighth S	nsen, P.A.	JAN 2 5 2007 I her Bridge	Cert eby certify that this s Postal Service wessed to the Mail	tificate o is Fee(s) rith suffic Stop IS	f Mailing or Transn	nission deposited with the United class mail in an envelope above, or being facsimile
Minneapolis, MN 1/25/2007 BABRAHA2			Do	uglas/J. C	. / 10 .	ensen	(Depositor's name)
1 FC:1501 1400.00				a layer Cliston - Tan. 23, 2007			(Signature)
2 FC:1504	30.	00 OP 00 OP 					(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/821,321 04/09/2004 TLE OF INVENTION: SWITCH DEVICE			Hiroyasu Hasegawa 2842.21US01			342.21US01	9694
THE OF INVENTIONS	SWITCH DEVICE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	02/28/2007
. EXAMI	INER	ART UNIT	CLASS-SUBCLASS				
YANG, CLARA I		2612	340-005620				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Patterson, Thuente, Skaar & Christensen, P. 2 2 3 3 3 3 3 3 3 3				
			THE PATENT (print or type	•	a ic idan	utified below the de	ourment has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Kabushiki Kaisha Tokai Rika Denki Seisakusho							
Please check the appropri	ate assignee category or	categories (will not be p	printed on the patent):	Individual 🛚 Co	rporation	or other private grou	p entity Government
la. The following fee(s) a X	o small entity discount p	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) X A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0631 (enclose an extra copy of this form).					
_ ~ .	us (from status indicated	,	_				
	SMALL ENTITY statu		b. Applicant is no long				
nterest as shown by the re	ecords of the United Sta	tes Patent and Trademark	ed from anyone other than th k Office.	e applicant; a regis	stered atte	orney or agent; or the	assignee or other party in
Authorized Signature	Nogley	Chita		Date	Jan	1.23,200	7
Typed or printed name <u>Douglas J. Christensen</u>			Registration No. 35,480				
This collection of information application. Confident unbritting the completed	ation is required by 37 C iality is governed by 35 application form to the	FR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will var	on is required to obtain or re 1.14. This collection is esti- y depending upon the indivi-	etain a benefit by the mated to take 12 n dual case. Any con	ne public ninutes to mments o	which is to file (and complete, including on the amount of time	by the USPTO to process) gathering, preparing, and e you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.